## **Application Data Sheet**

Middle Name::

## **Application Information** Regular Application Type:: Utility Subject Matter:: Suggested Classification:: Suggested Group Art Unit:: None CD-ROM or CD-R?:: Number of CD Disks:: Number of Copies of CDs:: Sequence Submission?:: Computer Readable Form (CRF)?:: Number of copies of CRF:: STRETCHING EXERCISER Title:: **KUO49** Attorney Docket Number:: Request for Early Publication?:: No No Request for Non-Publication?:: Suggested Drawing Figure:: 5 Total Drawing Sheets:: Yes Small Entity?:: Latin Name:: Variety Denomination Name:: No Petition Included:: Petition Type:: Licensed US Govt. Agency:: Contract or Grant Numbers:: Secrecy Order in Parent Appl.?:: No **Applicant Information** Inventor Applicant Authority Type:: Taiwan Primary Citizenship Country:: **Full Capacity** Status:: Johnson Given Name::

Family Name:: KUO

Name Suffix::

City of Residence:: Taipei

State or Province of Residence::

Country of Residence:: Taiwan

Street of Mailing Address:: 11F-1C, No. 342, Keelung Rd., Sec. 1

City of Mailing Address:: Taipei

State or Province of Mailing Address::

Country of Mailing Address:: Taiwan

Postal or Zip Code of Mailing Address::

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Taiwan

Status:: Full Capacity

Given Name:: Chin-Lien

Middle Name::

Family Name:: HUANG

Name Suffix::

City of Residence:: Taichung

State or Province of Residence::

Country of Residence:: Taiwan

Street of Mailing Address:: 2F, No. 14, Ning Hsia E. 5 St.,

City of Mailing Address:: Taichung

State or Province of Mailing Address::

Country of Mailing Address:: Taiwan

Postal or Zip Code of Mailing Address::

Correspondence Information

Correspondence Customer Number:: 001444

Representative Information

Representative Customer Number:: 001444

**Domestic Priority Information** 

Application:: Continuity Type:: Parent Parent Filing

Application:: Date::

## **Foreign Priority Information**

Country::

Application Number::

Filing Date::

Priority Claimed::

Taiwan

92214211

08/05/20

No

## **Assignment Information**

Assignee Name::

Street of Mailing Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::